MRI Service Utilization List, May 1, 2006 MOBILE ROUTES #66 - #73

Reporting Period January 1, 2005 through December 31, 2005

MRI Service ID Number and Service Name		Number of Clinical Units <u>1</u>	Number of Visits	Number of Adjusted Procedures <u>2</u>	Number of Available Adjusted Procedures
960287	Mobile #66	2	5,805	11,667	0
810080	Chelsea Community Hospital	2	568	739	0
50C626	Harper Metro Radiology	2	71	127	0
110070	Lakeland Medical Ctr-Niles	2	1,045	1,809	0
440010	Lapeer Regional Hospital	2	356	627	0
530010	Memorial Med Ctr of West Mich	2	89	234 <i>4</i>	0
820010	Oakwood Annapolis Hospital	2	25	44	0
41C011	Orthopedic Assoc of Grand Rapids	2	900	2,068	0
500110	St. Joseph Mercy/Clinton Township	2	608	1,502	0
820190	St. Mary Hospital/Livonia	2	14	33 <u>4</u>	0
590060	United Memorial Hosp, Greenville	2	2,129	4,486	0
960309	Mobile #67	1	4,002	6,775	0
730020	Covenant North - Harrison	1	1,678	1,846	0
09C002	St. Mary's Med Ctr-Bay City	1	1,040	1,463	0
350010	Tawas St. Joseph Hospital	1	1,284	3,467	0
970008	Mobile #68	1	3,692	6,020	0
590010	Carson City Hospital	1	56	101 <i>4</i>	0
370010	Central Michigan Comm Hospital	1	1,340	2,542 <i>4</i>	0
190010	Clinton Memorial Hospital	1	1,424	2,174	0
340020	Ionia County Memorial Hosp	1	872	1,204	0
990128	Mobile #73	1	3,439	5,169	0
63C690	Clarkston Ambulatory Corp.	1	1,741	2,544	0
630070	Crittenton Hospital	1	188	304	0
500060	Mich Resonance Imaging/MCGH	1	625	1,015	0
50C603	Mt. Clemens Medical Office	1	4	6	0
50C630	Neurosurgery Group, P.C.	1	74	119	0
63C670	Oxford Community Clinic	1	807	1,183	0

^{1 -} Includes existing, approved, and applications for additional magnets that have been deemed complete.

^{2 -} Adjustments are defined in Section 13 of the Certificate of Need Review Standards for Magnetic Resonance Imaging.

^{4 -} This MRI site submitted an application for a fixed MRI unit/service under Section 3(4) of the currently approved MRI Standards. In compliance with Section 15(1)(a)(ii) of these Standards all of the committed Adjusted Procedures for this site have been removed.

Note: These data represent all accepted data available to the Department for the January 1, 2005 through December 31, 2005 reporting period. These data DO NOT INCLUDE:

- a. Data that was not submitted on a timely basis.
- b. Data that has not completed system edits.
- c. The subtraction of "doctor commitments" for Certificate of Need applications for Magnetic Resonance Imaging services that were filed on or after the above report preparation date.

Source: Michigan Magnetic Resonance Imaging Data System CON Health Facilities Evaluation Section Michigan Department of Community Health